

Fill in this information to identify your case:

Debtor 1 Dwayne K. Mendoza

Debtor 2 Nila T. Mendoza
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF HAWAII

Case number 13-01333
(If known)

Check if this is:

- ☒ An amended filing
☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

- ☒ Employed
☐ Not employed

Retired

7 months

Debtor 2 or non-filing spouse

- ☒ Employed
☐ Not employed

Retired

19 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>0.00</u>	\$ <u>0.00</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>0.00</u>	\$ <u>0.00</u>

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	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	4. \$ 0.00	\$ 0.00	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 0.00	
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00	
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00	
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00	
5e. Insurance	5e. \$ 0.00	\$ 0.00	
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00	
5g. Union dues	5g. \$ 0.00	\$ 0.00	
5h. Other deductions. Specify:	5h.+ \$ 0.00	+ \$ 0.00	
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ 0.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 0.00	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 1,000.00	\$ 0.00	
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00	
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00	
8e. Social Security	8e. \$ 0.00	\$ 0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ 0.00	
8g. Pension or retirement income	8g. \$ 1,500.00	\$ 486.00	
8h. Other monthly income. Specify:	8h.+ \$ 0.00	+ \$ 0.00	
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 0.00	\$ 0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 2,500.00 + \$ 486.00	= \$ 2,986.00	
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:			11. +\$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies			12. \$ 2,986.00 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: Rental income may be interrupted			

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Debtor 1 Dwayne K. Mendoza

Debtor 2 Nila T. Mendoza
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF HAWAII

Case number 13-01333
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:
MM / DD / YYYY
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☒ No

☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? ☒ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 900.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

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6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ 0.00
6b. Water, sewer, garbage collection	6b. \$ 0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 0.00
6d. Other. Specify: <u>Cell Phone</u>	6d. \$ 182.00
<u>Cable TV</u>	\$ 188.00
7. Food and housekeeping supplies	7. \$ 400.00
8. Childcare and children's education costs	8. \$ 0.00
9. Clothing, laundry, and dry cleaning	9. \$ 130.00
10. Personal care products and services	10. \$ 61.00
11. Medical and dental expenses	11. \$ 150.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 400.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ 50.00
14. Charitable contributions and religious donations	14. \$ 0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ 0.00
15b. Health insurance	15b. \$ 0.00
15c. Vehicle insurance	15c. \$ 100.00
15d. Other insurance. Specify: _____	15d. \$ 0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>Taxes owed</u>	16. \$ 200.00
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ 0.00
17b. Car payments for Vehicle 2	17b. \$ 0.00
17c. Other. Specify: _____	17c. \$ 0.00
17d. Other. Specify: _____	17d. \$ 0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18. \$ 100.00
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$ 0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$ 0.00
20b. Real estate taxes	20b. \$ 0.00
20c. Property, homeowner's, or renter's insurance	20c. \$ 0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$ 0.00
20e. Homeowner's association or condominium dues	20e. \$ 0.00
21. Other: Specify: <u>Tax Preparation</u>	21. +\$ 20.00
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22. \$ 2,881.00
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ 2,986.00
23b. Copy your monthly expenses from line 22 above.	23b. -\$ 2,881.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ 105.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes. Explain: _____

1st Finl Invstmnt Fund
230 Peachtree St
Atlanta, GA 30303

Bank Of America
Po Box 982235
El Paso, TX 79998

Barclays Bank Delaware
Attn: Bankruptcy
P.O. Box 8801
Wilmington, DE 19899

Cadmus Properties Corp.
332 North School Street
Honolulu, HI 96817

Cap1/bstby
Po Box 30253
Salt Lake City, UT 84130

Carolyn P. Mendoza
2214 California Avenue
Wahiawa, HI 96786

Chex Systems Inc.
Attn: Consumer Relations
7805 Hudson Rd. Ste 100
Woodbury, MN 55125

Citibank Sd, Na
Attn: Centralized Bankruptcy
Po Box 20363
Kansas City, MO 64195

Department of Taxation
Attn: Bankruptcy Unit
PO Box 259
Honolulu, HI 96809-0259

Equifax Credit Information Service
PO Box 740241
Atlanta, GA 30374

Equity Properties Inc.
500 Alakawa Street, Bldg 214
Honolulu, HI 96817

Experian
PO Box 2002
Allen, TX 75013-2002

Gecrb/walmart
Po Box 965024
Orlando, FL 32896

Hsbc Bank
Po Box 30253
Salt Lake City, UT 84130

Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101-7346

Internal Revenue Service
PO Box 21126
Philadelphia, PA 19114

M & T Bank
Attn: Bankruptcy
1100 Wehrle Dr 2nd Floor
Williamsville, NY 14221

Nco Fin/67
1001 Bishop Tower Ste 48
Honolulu, HI 96813

Onemain Financial
6801 Colwell Blvd
Irving, TX 75039

OneMain Financial
Bankruptcy Dept.
PO Box 6042
Sioux Falls, SD 57117-6042

OneMain Financial
300 St. Paul Place
Baltimore, MD 21202

Pearl Harbor Fcu
94-449 Ukee St
Waipahu, HI 96797

Pugt Snd Col
Pob 66995
Tacoma, WA 98464

Telecheck
6200 South Quebec St.
Greenwood Village, CO 80111

Transunion
PO Box 2000
Chester, PA 19022-2000

Waihau Properties LLC
350 Ward Avenue, Suite 106-400
Honolulu, HI 96813

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UNITED STATES BANKRUPTCY COURT
 DISTRICT OF HAWAII
 1132 Bishop Street, Suite 250
 Honolulu, Hawaii 96813

Dwayne K. Mendoza
Nila T. Mendoza

Chapter: **7** Case No.: **13-01333**

Related Docket No.:

COVER SHEET FOR AMENDMENTS	
Check all of the following that are being amended.	<input type="checkbox"/> List of Creditors / Mailing Matrix
Schedules: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> G <input type="checkbox"/> H <input checked="" type="checkbox"/> I <input checked="" type="checkbox"/> J	<input type="checkbox"/> \$30.00 fee (must be paid unless (i) only updating an address, or (ii) only adding a creditor's attorney)
Schedules: <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F (\$30.00 fee for 1 or more)	
<input type="checkbox"/> Statement of Financial Affairs	<input type="checkbox"/> List of Equity Security Holders
<input type="checkbox"/> Statement of Intention	<input type="checkbox"/> List of 20 Largest Unsecured Creditors
<input type="checkbox"/> Statement of Monthly Income (Ch 7 - with Means Test / Ch 13 - with Disposable Income Calculation)	
DECLARATION BY DEBTOR(S)	
<p>I declare under penalty of perjury that the attached amendments are correct to the best of my knowledge, information, and belief. <i>[If filing electronically through ECF, a Declaration re: Electronic Filing with original signatures must be submitted on paper not later than 7 days after filing the amendments.]</i></p>	
<u>/s/ Dwayne K. Mendoza</u> Dwayne K. Mendoza Signature of Debtor Dated: <u>June 6, 2014</u>	<u>/s/ Nila T. Mendoza</u> Nila T. Mendoza Signature of Joint Debtor Dated: <u>June 6, 2014</u>
CERTIFICATE OF SERVICE	
<p>The undersigned certifies:</p> <p><input checked="" type="checkbox"/> Notice of the amendments has been served on all creditors and parties in interest on the attached service list. (If exemptions or exemption amounts have been amended, a copy of Schedule C has been served on all creditors and parties in interest.)</p> <p><input type="checkbox"/> A copy of the Notice of Bankruptcy Case, Meeting of Creditors, & Deadlines has been served on the additional creditors and parties in interest identified on the attached service list.</p>	
Dated: <u>June 9, 2014</u>	<u>/s/ W. Richard Abelman</u> W. Richard Abelman 9158

Attach amended schedules or statements to cover sheet. Attach a service list with names and addresses where notice was sent.